| No. W 45300 | | Due no later than Dec 31, 2010 | | | 2. Registered Agent and Address (NO PO BOX) | | | |
|--|--|--|---|------------------------------|---|-------------------|-------------------------|--|
| Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 | | Annual Report Form 1. Mailing Address: Correct in this box if needed. TUSCAURORA, LLC JEFF BLICK 310 FEDERATION ROAD TWIN FALLS ID 83301 | | 310 FEDERAT TWIN FALLS | JEFF BLICK 310 FEDERATION ROAD TWIN FALLS ID 83301 3. New Registered Agent Signature:* | | | |
| NO FILING FEE IF RECEIVED BY DUE DATE | | | | | | | | |
| 4. Limited Liability Compa | anies: Enter Nai | mes and Addresses | s of at least one Member or Manager. | | | | | |
| Office Held | Name | | Street or PO Address | City | State | Country | Postal Code | |
| MEMBER MEMBER MEMBER | JEFF BLICK MICHAEL MELLOWS STEVE ADAMS | | 310 FEDERATION ROAD 1639 ZALDIA 2650 ERMINIA DR | TWIN FALLS MINDEN RENO | ID NV NV | USA USA USA | 83301 89423 89523 | |
| 5. Organized Under the Laws of: | | 6. Annual Report | | | | | | |
| ID W 45300 | | Signature: Jeff Blick | | Da | Date: 01/10/2011 | | | |
| | | Name (type or print): Jeff Blick | | Title: Member | | | | |
| Processed 01/10/2011 | | * Electronically provided signatures are accepted as original signatures. | | | | | | |